Perso	on Filing:	
Addre	ess (if not protected):	
City, S	State, Zip Code:	
-	phone:	
	I Address:	
Lawye	er's Bar Number:	For Clerk's Use Only
Licens	sed Fiduciary Number:	
Repre	esenting Self, without a Lawyer or Attorney for Petitioner OF	R Respondent
	AFFIDAVIT FOR COLLECTION ALL PERSONAL PROPERT	
	TE OF ARIZONA) ICOPA COUNTY)	
By si corre	signing this affidavit, I swear or affirm under penalty of perjury ect.	that its contents are true and
1.	INFORMATION ABOUT THE DECEASED (THE PERSON	WHO DIED):
	Name of person who died:	
	Date of death:	
	Place of death:	
2.	30-DAY REQUIREMENT: More than thirty (30) days have gone by	by since the person died.
3.	RELATIONSHIP: My relationship to the person who died is: (expla	ain)

- **4. VALUE OF PERSONAL PROPERTY.** The value of all the personal property in the deceased person's estate, wherever located, minus the amount of liens and encumbrances on the property, is not greater than \$75,000.00.
- **PERSONAL REPRESENTATIVE.** To the best of my knowledge, no one has filed an Application or Petition for Appointment of a Personal Representative and no Application or Petition has been granted in any state OR if an application has been granted the personal representative has been discharged or more than one year has elapsed since a closing statement has been filed and the amount does not exceed \$75,000.00.

aelive	TITLEMENT. I am the claiming successor to the personal property and I am entitled to paymentery of the property because I am. (Check all boxes that apply.)					
	I am named in the Will of the person who died, a copy of which is attached to this Affidavit.					
	The deceased had no Will, but I am entitled to the property under law because (check ONE)					
		I am the spouse of the person who died;				
		I am a child of the person who died, and there is no surviving spouse, or there is a survivir spouse but he or she is not my parent and the deceased had separate or community property;				
		I am the parent of the person who died, and there is no surviving spouse or child;				
		I am a brother or sister of the person who died, and there is no surviving spouse, child parent.				
		The person died w	vithout a will and I am t	the sole heir.		
	th equal or greater right than I have to the propertate to me, which is proven by the copy of taching to this affidavit.					
	The person died and left a valid Will and the people with equal or greater right than I have property have all assigned their entire interests in the estate to me, which is proven by the the documents they signed to this effect that I am attaching to this affidavit.					
	prope	erty have all assigned	I their entire interests i	n the estate to me, which is proven by the co		
DES	prope the do	erty have all assigned ocuments they signed	I their entire interests in the distribution of the their entire interests in the distribution of the their entire interests in the distribution of the distribution o	n the estate to me, which is proven by the connattaching to this affidavit. In died owned the following personal property.		
DES	property. A	erty have all assigned occuments they signed	I their entire interests in the distribution of the third entire interests in the distribution of the their entire interests in the distribution of the distribution o	n the estate to me, which is proven by the connattaching to this affidavit. In died owned the following personal property.		
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DES	property. A	erty have all assigned occuments they signed	I their entire interests in the control of the thing of the control of the contro	n the estate to me, which is proven by the corn attaching to this affidavit. do died owned the following personal property. Location, or Who Has Property No		

8.	MONEY OWED: The person who died was entitled to collect on the following debts from persons located in Arizona. (List all. Attach extra pages if necessary.)					
	Description	Amount owed	Name of Who Owes the Debt			
		\$				
		\$				
	TOTAL AMOUNT OWED: \$					
9.	This affidavit is made under Arizona Law, Sec. 14-3971(B), Arizona Revised Statutes, for the purpose of making claim to personal property of the person who died.					
	TH OR AFFIRMATION contents of this document are true	and correct under	penalty of perjury.			
Signa	ature of Person Making Affidavit		Date			
Printe	ed Name					
Swor	n to or Affirmed before me this date:		Date			
(Seal/	(My Commission Expires)					
		Deputy Clerk of	Court or Notary Public			
@ S ur	perior Court of Arizona in Maricona County		PBSF11f-090413			